

Hospice Screening Tool



Patient Name: _____ Date: _____ Admitted Not Admitted

Contact Name: _____ Contact Number: _____

IDENTIFYING SIGNS AND SYMPTOMS MAY INCLUDE:

- | | | |
|---|--|---|
| <input type="checkbox"/> Progressive status decline despite treatment | <input type="checkbox"/> Dependence in 2/more ADLs | <input type="checkbox"/> Alterations in mental status |
| <input type="checkbox"/> Frequent hospitalization in past 6 months | <input type="checkbox"/> Progressive or profound weakness or fatigue | <input type="checkbox"/> Continued weight loss >10% |
| <input type="checkbox"/> Repeat/multiple infections: UTI, Pneumonia | <input type="checkbox"/> Shortness of breath/cough | <input type="checkbox"/> Decrease in PPS, FAST, MAC |
| <input type="checkbox"/> Changes in labs-Albumin, BNP, Na+, K+, Cr | <input type="checkbox"/> Difficulty swallowing - N/V | <input type="checkbox"/> Other uncontrolled symptoms/pain |

Check signs and symptoms above; circle specific indicators below that would apply per diagnosis and refer to Hospice Services for Evaluation. (Local Coverage Determinations from CGS Determining Terminal Status Worksheets)

HEART DISEASE

1. Optimally treated for heart disease, is not a surgical candidate or refuses these procedures
2. Stage IV NYHA-Ejection fraction of 20%
3. Chest pain at rest
4. History of cardiac arrest and/or resuscitation in any setting
5. History of unexplained syncope
6. Arrhythmias resistant to therapy

STROKE AND COMA

1. Severe obtundation or coma greater than 3 days duration
2. Dysphagia which prevents sufficient intake to sustain life and/or refusing artificial nutrition/hydration
3. Post stroke dementia
4. PPS <40%
5. See dementia criteria

ALZHEIMER'S/DEMENTIA

1. Stage 7 FAST scale
2. Unable to bathe, ambulate, dress or feed self
3. Speech limited to 6 intelligible words in the average day
4. Cannot sit up without assistance
5. Urinary and fecal incontinence
6. History of aspiration pneumonia, URI, septicemia, pressure ulcers, recurrent fever after antibiotics past 12 months
7. Unintentional wt loss of 10% in past 6 months
8. Dysphagia

RENAL DISEASE

1. Not receiving dialysis
2. Creatinine clearance <10cc/min(<15cc/min for diabetics)
3. Serum creatinine >8.0mg/dl (>6.0mg/dl for diabetics)
4. Clinical signs such as confusion, nausea, vomiting, itching
5. Hepatorenal syndrome
6. Intractable fluid overload

PULMONARY DISEASE

1. Shortness of breath at rest - Poor response to bronchodilators - SaO2 <88%
2. Increased ER visits and/or hospitalizations for pulmonary infections
3. Right heart failure
4. Progressive weight loss >10% prior 6 months
5. Resting pulse rate over 100/min.

AMYOTROPHIC LATERAL SCLEROSIS (ALS)

1. Vital capacity is less than 30% of normal
2. Significant dyspnea at rest requiring O2
3. Critical nutrition impairment
4. Refusing artificial ventilation or feedings
5. Recurrent aspiration pneumonia, UTI, sepsis

LIVER DISEASE

1. PT>1.5, Serum albumin <2.5
2. Ascites
3. Infections - bacterial peritonitis, Hep B or C
4. Hepatorenal syndrome (cirrhosis and ascites, elevated renal functions, decreased urine output, urine sodium concentration of <10mcg/l)
5. Hepatic encephalopathy (decreased mental status, sleep disturbance, depression, emotionally labile, slurred speech, somnolence, tremors.)
6. Recurrent variceal bleeding
7. Progressive malnutrition - muscle wasting, continued alcoholism.

CANCER

1. Final disease stage of cancer - progressive metastases
2. Continued decline despite therapy
3. Not seeking aggressive treatment

HIV DISEASE

1. Each case evaluated upon viral load, CD4 count, adequate caloric intake, life threatening complications, etc.
2. Patient cannot be pursuing active curative therapy
3. PPS <50%